

**Provider Type 22****Provider Documentation Requirements****Rehabilitative and Restorative Services**

Specialty	Sub-Specialty	Enroll Type	Certification	License	Rate Letter	Rider A	Other Agency	Comments
<i>031 Physical Therapist</i>		Ind		Professional				
<i>031 Physical Therapist</i>		Group		No				Need to enroll at least 2 licensed professionals
<i>031 Physical Therapist</i>		FAO		Professional				
	413 DME/Supplies							
	416 MR Waiver Services						X	Approval by BDS
<i>033 Occupational Therapist</i>		Ind		Professional				
<i>033 Occupational Therapist</i>		Group		No				Need to enroll at least 2 licensed professionals
<i>033 Occupational Therapist</i>		FAO		Professional				
	416 MR Waiver Services						X	Approval by BDS
<i>035 Freestanding Day Hab</i>		FAO		Agency				Approval by BDS
	306 Adult Services						X	Approval by BDS
	307 Children's Services						X	Approval by BDS
	416 MR Waiver Services						X	Approval by BDS
<i>035 Day Health Services</i>		FAO		Agency			X	Approval by Assisted Living
<i>035 Rehabilitation Services</i>		FAO	CARF/CORF	No	X			
<i>035 Home based services for children</i>		FAO		No	X		X	Approval by BDS